

## Book, Video, and Film Reviews

Abrams, Charlotte. *The Silents*. Washington, DC: Gallaudet University Press, 1996, 261 pages, \$24.95 hardcover.

Preston, Paul. *Mother Father Deaf: Living between Sound and Silence*. Cambridge, MA: Harvard University Press, 1994, 278 pages, \$24.95 hardcover, \$14.95 softcover.

Reviewed by John B. Christiansen, Department of Sociology, Gallaudet University, Washington, DC.

*The Silents*, by Charlotte Abrams, is the latest book written by a "coda" (a term that is generally used to refer to adult hearing Children Of Deaf Adults) that attempts to give readers some idea of what life was like for hearing children growing up with deaf parents during a period when opportunities for deaf people were considerably more circumscribed than they are now. Most of the books in this genre are similar to *The Silents* in that they focus primarily on the experiences of one family. Perhaps the best known (and perhaps the best written) is Lou Ann Walker's *A Loss For Words*, a book that was published more than a decade ago. Paul Preston's work, *Mother Father Deaf*, is somewhat different in that, instead of focusing on one family (he is also a coda), Preston attempts to draw some general conclusions that transcend his own situation.

Charlotte Abrams wrote *The Silents* long after the events she describes occurred and, indeed, years after her parents died. Most of the stories she relates took place when she was a young woman in Chicago. She is now, as the book jacket notes, a writer living in California, where she moved in 1962. It would be interesting to know why the author took so long to get the story out.

And, for the most part, it is a story worth telling. Ms. Abrams' parents come across not only as dedicated parents, but also as kind and loving people forced to cope with insults and indifference that, in those pre-ADA and pre-deaf empowerment years, were all too common. The author's stories that center around her mother's progressive blindness are particularly moving (and often inspiring), and the stories about the lack of any real communication between her deaf parents and many of their hearing relatives are quite disheartening.

The stories that make up the book, while interesting to read, are, however, somewhat disjointed. They are usually not presented in any type of chronological context, and, thus, it is often difficult to know when the events she describes occurred. Moreover, none of the twenty-nine chapters has a heading, nor are the three major parts of the book given labels.

Another annoying problem is that the author often presents extended conversations that occurred fifty or more years ago in a way that, to be charitable, probably did not happen exactly the way she depicts them. I also found the author's use of phrases like "deaf talk" and "we talked deaf" to be somewhat grating.

Paul Preston's book is much more "academic" than *The Silents* and, unfortunately, too often reads like the thesis or dissertation it may well have originally been (the author does not say). Readers who have a low tolerance level for a narrative that includes an abundance of phrases such as "paradigm shifts," "synergistic factors," "enmeshment," and "monoifith functional levels" are warned that, at more than a few points, this book is not for those who have not been initiated into the jargon of contemporary social science (or, more specifically, "postmodern anthropology").

Preston spent about a year interviewing a reasonably diverse sample of 150 codas in various parts of the country. Some of the more interesting findings include the fact that many informants still felt caught between two cultural worlds (deaf and hearing); frequently found themselves assuming adult responsibilities, including interpreting for their parents, at an early age; and were frequently treated extremely well by their hearing grandparents who, more often than not, had great difficulty communicating with their deaf children (the codas' parents). Preston also includes

a very helpful glossary and an extensive list of references at the end of the book.

While *Mother Father Deaf* contains some interesting information and adds to the literature that emphasizes a cultural, as opposed to a medical or psychological, interpretation of deafness and deaf people, the author's conceptualizations and typologies seem, at times, to overwhelm the data. It would have been better to have allowed the informants more space to speak for themselves about their experiences, and to have reduced the amount of space devoted to the author. This book has a sometimes fuzzy and confusing analysis.

Accardo, Pasquale J., Whitman, Barbara Y., Laszewski, Carla, Haake, Carol A., and Morrow, Jill D. *Dictionary of Developmental Disabilities Terminology*. Baltimore, MD: Paul H. Brookes Publishing Co., 1996, 368 pages, \$55.00 hardcover, \$35.00 softcover.

Reviewed by Patrick J. Ryan, Ph.D. Candidate, Department of History, Case Western Reserve University, Cleveland, OH.

The *Dictionary of Developmental Disabilities Terminology* will be welcomed and applauded by professionals who provide assistance to persons with neurodevelopmental diagnoses, including mental retardation, cerebral palsy, various learning disabilities, autistic disorders, communication disorders, and others. As is the expressed purpose of this dictionary, it provides concise, clear, non-technical, but accurate definitions for terms and acronyms that often appear in case notes and reports, but are not always understood equally well by all members of interdisciplinary teams, including the client's family members.

The *Dictionary* contains over 3,000 entries, and it is helpfully illustrated with hundreds of drawings, diagrams, and charts. Medical terminology has received the largest share of attention. This seems appropriate to the longer history and greater volume of terms used by medical personnel, but it also reflects the purpose of the project and the predominant direction that information takes in the interdisciplinary chain of reports. From this reviewer's own experiences as a vocational and residential counselor, it seems that the social service providers (that is, counselors, case managers, educators) often utilize psychiatric or other medical reports in the construction of service plans with clients and their families, but often without the presence of medical personnel in team meetings. Though the entries do not include technical explorations of medical or psychological concepts, they will allow professionals to confirm that they understand the meanings of terms, remind themselves of concepts they have been trained to use, or allow them to identify points where they should consult more extensive textbooks or manuals.

The *Dictionary* does not attempt to enter into present discourses or a review of the history of debates surrounding contested terms such as "intelligence." However, the authors are especially adept at highlighting points of debate or providing very brief descriptions of key historical figures that will allow readers to seek other sources. They have also included definitions for terms that lack present clinical status.

Service providers and family members of persons with developmental disabilities should review a copy of *The Dictionary of Developmental Disabilities Terminology*.

Anderson, Winifred, Chitwood, Stephen, and Hayden, Deidre. *Negotiating the Special Education Maze: A Guide for Parents & Teachers* (3rd ed.). Bethesda, MD: Woodbine House. 1997, 282 pages, \$22.95 hardcover, \$16.95 softcover.

Reviewed by Phyllis Rubenfeld, Ed.D., Professor, Hunter College of the City University of

New York.

Even though twenty-three years have gone by since the passage of the Individuals with Disabilities Education Act (IDEA), there is still a need for guidebooks like *Negotiating the Special Education Maze: A Guide for Parents and Teachers* that clearly outline the cumbersome series of steps one has to go through to obtain special education services appropriate for a given child. The authors are particularly clear in their description of the various procedures parents must follow as they make their way through the maze that is special education, and they include very helpful charts designed to enable parents to identify, organize, and record relevant information as they negotiate the system.

The book is less successful as a guide to the larger issues that provide the context for educational legislation. The authors omit any discussion of the disability rights movement, for instance, and they do not mention how either Section 504 or the Americans with Disabilities Act (ADA) relates to IDEA.

The book also suffers from a limited perspective on the all-important topic of the Least Restrictive Environment. For one thing, the authors leave out any mention of the possibility that a disabled child might benefit from placement in a general education classroom, with or without support; and they entirely overlook extracurricular activities, such as music, dance, or swimming lessons, which should always be included in a child's Individual Education Plan, not least to ensure that transportation from school to activities will be made available.

The authors' shortsightedness may well be the result of their having failed to consult disabled people themselves, particularly those professionals who themselves have been successfully educated in special programs; instead, the authors have relied on parents and nondisabled "experts" for all their information. This oversight is by no means unusual in texts of this sort, but it is, nevertheless, ironic that the book under review should have as its primary focus the enablement of the parents of disabled students rather than that of the disabled students themselves.

I would use parts of this text, but I would not assign it as the primary text for a graduate level course.

Batshaw, Mark L., ed. *Children with Disabilities* (4th ed.). Baltimore, MD: Paul H. Brookes Publishing Co., 1997, 960 pages, \$49.95 hardcover.

Reviewed by Nancy Vitalone-Raccaro, Ph.D., Westchester Institute for Human Development at New York Medical College.

Once again, Mark Batshaw has provided us with a complete and thorough compendium of useful information regarding young children with disabilities and their families. This is the fourth edition of a book that was originally published in 1981. Having used the previous editions personally, this reviewer was not disappointed with the new and improved version. Mark Batshaw has taken pains to maintain a consistency in format, while providing information discovered through medical and scientific advances, and including new (re)habilitative and educational interventions. Particularly impressive, not to mention useful, are the current and up-to-date references cited in each chapter.

*Children with Disabilities* begins with extensive coverage of genetics and heredity and describes their role in producing various developmental disabilities. The course of prenatal, neonatal, and early childhood development is subsequently reviewed. These chapters also trace occurrences of disabilities at different stages of development. Individuals looking for specific disability related

information will find the chapters devoted to particular disabilities especially valuable. One of the many appealing aspects of the book is that intervention is covered throughout the chapters. By addressing intervention within the context of clinical information, Mark Batshaw and the contributing authors have provided a guidepost for appropriate practice. This occurrence helps orient readers, even the casual reader who may only read one or two chapters, toward an interdisciplinary approach in working with young children with disabilities and their families. The transition to adulthood and health care in the 21st Century are worthwhile additions to the fourth edition. The appendices include a glossary; a list of syndromes and inborn errors of metabolism and the principal characteristics, causes, patterns of inheritance, frequency of occurrence, common developmental abnormalities, and recent references that further define the syndromes; a list of commonly used medications, their properties, and their uses; resources for children with disabilities; and an index.

The sheer size of the book can be daunting; however, this fact should not deter a prospective reader. Chapters are packed with information, yet short enough so as not to be overwhelming. The reader can easily complete one chapter in a reasonable amount of time, making the content of the book easily accessible. The writing style and chapter format are consistent from chapter to chapter, which also make this lengthy book manageable. Each chapter begins with learning objectives to orient the reader to the content of the particular chapter and ends with a summary that provides key elements of the material covered. Additionally, a pertinent case example brings alive the conditions and issues discussed in the chapter. Although the longer case examples are more helpful than the shorter ones in exemplifying chapter content, all situational examples serve as a nice bridge between the clinical and the practical. This is useful for all readers. Key medical terms appear in bold type at their first use, and definitions for these terms appear in the glossary. The many drawings, photographs, X-rays, and tables reinforce the points of the text and provide a way to more easily understand and remember the material that was read.

A particularly appealing and beneficial aspect of *Children with Disabilities* is the family-focused nature of the content. All contributors are sensitive to the role of families, and recommendations for supporting families and considering their perspectives are continually reinforced. The importance of the family and the impact that disability has on families is never downplayed, a critical point of view that cannot be underscored enough. The emphasis on a team approach and collaboration among professionals, as well as family members, is likewise propitious.

*Children with Disabilities* is a resource that will be (and should be) heavily used by professionals, lay persons, and families alike. Mark Batshaw has successfully elevated the nature of reference books by providing us with a comprehensive resource for all disability reference needs.

Baynton, Douglas C. *Forbidden Signs: American Culture and the Campaign Against Sign Language*. Chicago, IL: University of Chicago Press, 1996, 228 pages, \$27.50 hardcover.

Reviewed by Patricia Mudgett-DeCaro, National Technical Institute for the Deaf at the Rochester Institute of Technology, Rochester, NY.

Educators have been engaged since the Enlightenment in a "war of methods" over whether to use sign language (manualism) or speech and lip-reading (oralism) for the education of deaf children. Deaf education in Nineteenth Century America began with manualism and ended with oralism. Baynton shows how both made sense as Americans moved from a romantic and religious world view to a scientific and utilitarian world view. "The debate over sign language called upon and expressed the central debates of the time, involving such fundamental issues as what distinguished Americans from non-Americans, civilized people from 'savages,' humans from animals, and men

from women; what purposes education should serve; and what 'nature' and 'normality' meant and how they were related to one another" (p. 1).

Baynton explains that, for the early Evangelical Protestant educators, the tragedy of deafness was isolation from God and the Christian community. Sign language was God's gift to save deaf people. Signs came first and, therefore, were closer to God; and they were more pure, natural, and innocent than subsequent spoken languages. Deaf people were acceptably different. However, for later educators the tragedy of deafness was isolation from the national community. Deaf clubs and sign language seemed "foreign" at a time when immigration was creating frightening, foreign enclaves. The theory of evolution made the gestures and facial expressions of sign language seem akin to primitive, subhuman stages of evolution. In the emphasis on standardization and assimilation, "natural" became what was "normal." Sign language was not normal, nor was it practical for work in a hearing society. Different was unequal and unacceptable. Finally, Baynton demonstrates how the increasing role of women in the work force as cheap labor made labor-intensive oral education possible.

Baynton has given us a very well-written book with interesting and convincing supporting evidence that establishes the historical and cultural context for the dominance of, first, manualism and, then, oralism. The controversy is still current, but appears in different form and in the midst of another cultural change. This book offers an excellent example of a way to make sense of the issues within the current cultural context. However, it is precisely in Baynton's effort to do so that his book seems to fall short. While noting that recent history needs a book of its own, he, nonetheless, extrapolates to the present without the meticulous grounding that characterizes the rest of the book and, thereby, loses much of the complexity of the interaction, fails to truly discuss the cultural changes occurring now, and appears in some measure to move from fact towards political position. Additionally, a bibliography would have been helpful. This aside, *Forbidden Signs* offers a deeper understanding for a very well-known point in time that is too often discussed as political agenda without careful academic grounding. This book is an important co

Bertling, Tom. *No Dignity for Joshua: More Vital Insight into Deaf Children, Deaf Education and Deaf Culture*. Wilsonville, OR: Kodiak Media Group (P.O. Box 1029-KM43, Wilsonville, OR 97070), 1997, 112 pages, \$21.95 softcover.

Reviewed by Ellie Rosenfield, Associate Professor, National Technical Institute for the Deaf, Rochester, NY.

The author's crusade to reveal the detrimental effect of residential schools on deaf youth continues in *No Dignity for Joshua*. Written for parents of deaf children, deaf educators, and people having a professional or social interest in the deaf, Mr. Bertling zealously portrays the deficiencies in deaf education.

While there is an important story to tell, this book does little to advance the discourse. Rather than present his arguments in a fair and reasoned manner, Mr. Bertling sensationalizes the subject. Where the reader needs to find issues clearly defined, arguments presented, and facts substantiated, this book is little more than yellow journalism. In fact, it reads like a clipping file of headlines from recent issues of deaf newspapers and magazines.

His analysis of the state of residential education is presented through Joshua, a composite character, who has suffered all of the evils of this system. While Joshua's story is compelling and provocative, it is also disturbingly one sided. The problems of sexual, emotional, and physical abuse, poor academic achievement, and the cost of education are terribly important issues. Readers

deserve to learn about them in a more balanced way.

According to Bertling, deaf-militants and the culturally-deaf leaders want to preserve deaf culture at any cost. The author criticizes their political agenda by briefly discussing American Sign Language, the Gallaudet protest, Social Security Disability, and cochlear implants.

At times this book becomes a personal soapbox. The author uses Chapter 7, "Hearing Injustices," to express his personal angst against his past employers, audiologists, doctors, and relay operators, and even his mechanic. The personal becomes the political, and his anger with an unfair system is revealed in the weak construction of his arguments.

If you are looking for a concise text to clarify the issues in deaf education and to aid in the decision-making process of what educational option is best for your deaf child, let me urge you to look beyond Mr. Bertling's offering.

Christensen, Carol, and Rizvi, Fazal, eds. *Disability and the Dilemmas of Education and Justice*. Philadelphia, PA: Open University Press (Distributed by Taylor & Francis, 1900 Frost Road, Suite 101, Bristol, PA 19007-1598), 1996, 193 pages, \$27.95 softcover.

Reviewed by Laurie R. Lehman, Department of Teaching and Learning, Long Island University, Brooklyn, NY.

*Disability and the Dilemmas of Education and Justice*, edited by Carol Christensen and Fazal Rizvi, is a very important book for educators, parents, and others concerned about the education of students with disabilities. Its authors ask the reader to confront the definition of justice in education today and why current policies and procedures, as its by-products, are failing many children. Through the cultural lens of a diverse group of educators from Britain, Australia, South Wales, and the United States, these authors analyze the framework of "justice" used in special education as equal opportunity, and they call for a broader interpretation. Though these authors bring different social and educational experiences to the discourse, they all share the belief that economic and political considerations are creating inequity for students with disabilities.

Several writers in this anthology argue that the application of justice as access and equal opportunity is necessary, but insufficient. "Access itself does not guarantee either full participation or more equal outcomes" (Rizvi & Lingard, p. 22). Howe argues it diverts attention from the "real" problem, which is structural sources in schooling that perpetuate class differences, and legitimate and continue inequality.

The consequences of an inadequate formulation of justice are presented, with appreciation for its impact on race, class, ability, and gender. Christensen derides the personal tragedy view of disability perpetuated in education today that points the finger not at the school, but at the student for educational failures. Several authors (Slee, Marks, and Meekosha & Jakubowicz) discuss how it is no coincidence that, while the current system is taking an individualistic approach to students and their limitations, it minimizes cultural, economic, and social differences. "If we are fixated on determining scales of deficiencies for compensatory intervention, we condemn ourselves to the marginalization of students whose longer-term options will be limited" (Slee, p. 112). In brief, equal opportunity through distribution of resources maintains the current school structure, perpetuates excluding students with any difference, and, at the same time, ignores diversity because such a system can not accommodate it.

What can be done? These authors provide several logical alternatives rooted in a reformulation of social justice as a complex interplay of economic and cultural dimensions. "What is required now is a 'complex equality' construction of justice with a strong recognition of cultural

rights within a broad redistributive framework” (Rizvi & Lingard, p. 25). Many propose that only when social justice for students with disabilities is seen as a central issue will ways to implement integration be clarified and ultimately successful.

For those of us who are frustrated with the numerous systemic problems in special education, this book offers a compelling ideological argument for a stronger moral foundation. Though not an easy solution, “taking the moral high ground” provides us with a clarity in mission that is needed in the field today.

DeBoskey, Dana S. *An Educational Challenge: Meeting the Needs of Students with Brain Injury*. Houston, TX: HDI Publishers (1-800/321-7037), 1996, 108 pages, \$14.50 softcover (quantity discounts available).

Reviewed by Venta Kabzems, Education and Disability Consultant, Edmonton, AB, Canada.

The book is a bargain! It covers evaluation and diagnostic procedures clearly, with examples of assessment tasks and a comment on their relevance for school learning. A chapter on brain function succinctly describes general principles of neuroanatomy and the effects of various types of head injury. The amount of information presented is sufficient for a teacher to appreciate the physiological basis for many observed behaviors. This chapter highlights what is, perhaps, the most important point of working with students who have received a brain injury, which is that the effects of more than one mild brain injury tend to be multiplicative.

Individuals who have had a brain injury are at substantially higher risk for subsequent brain injury. The author notes that certain events may not be viewed as significant in school records—the high school football player who receives numerous hard tackles during the season, or the toddler who tumbled down the basement stairs and may or may not have lost consciousness, the student who was revived from near fatal drowning, or, perhaps, the child who experienced an infectious disease such as meningitis.

The author emphasizes that, irrespective of where a student with a brain injury is served, psychologists, administrators, teachers, and other professionals (and I would add paraprofessionals) need to familiarize themselves with the etiology of the particular student’s injury in order to work effectively. Working with a student whose injury appears to be limited to particular parts of the brain is very different than working with one whose closed head injury may have involved generalized bleeding within the skull. Another important point made by the author is the need to include knowledge of the student’s pre-morbid condition, as it can influence new learning.

In this short volume, the author manages to address several theories of cognitive processing and their implications for education. From the perspective of a busy teacher, perhaps in a regular classroom of 25 students, who is preparing to include a new student just released from the hospital, the lists of intervention strategies listed by presenting problem is wonderful. Secondly, the majority of intervention strategies listed do not require time and labor-intensive adaptations to curriculum or materials. Given the usefulness of these strategies, it is suggested that any future editions of this book include an index so that they can be more readily located.

This practical book is very clearly written and contains sound intervention strategies for students with brain injuries. The book is highly recommended to teachers, educational psychologists, intervention personnel in hospital or early intervention settings, practitioners, and students in areas of child development and rehabilitation.

Goode, D. *A World without Words: The Social Construction of Children Born Deaf and Blind*. Philadelphia, PA: Temple University Press, 1994, 261 pages, \$59.95 hardcover, \$19.95 softcover.  
Reviewed by Randall R. Myers, LCSW-C, Jewish Social Service Agency, Gaithersburg, MD.

This book demonstrates the power and process of the ethnomethodological research approach used to describe "lived orders," i.e., how people in society structure their lives on an everyday basis. Goode exemplifies the use of this method through two case studies of subjects, Christina and Bianca, who are deaf, blind, retarded, and have no formal language, one living in an institutional setting and the other with her natural family. Goode engaged both of these individuals in their natural environments as much on their terms as possible, and describes their strengths and limitations as well as his own perceptions of his experience with them and his recording of data about them. He used a broad range of resources available, including naturalistic observation, medical and behavioral profiles, videotaping, observations of normal procedures and routines, and the input of staff, clinicians, and parents. As opposed to quantified descriptions, Goode suggests that this research method is most effective for charting out the landscape of socially-constructed views of social phenomena. We need such studies to explore research questions, to sensitize us, to provide valuable insights into more effective interventions, to design training curricula, or to develop specific practice techniques. Goode's discussion raises several epistemological issues—for example, that the body has natural ways of communicating that do not require formal language, and that these ways, rather than being interpreted in biological or psychological terms, need to be understood as socially constructed in their context and intended meaning.

Dr. Goode's book is instructive, well-organized, reflective, and thought-provoking. How can we generalize the use of this methodology in Disability Studies? Goode states in his conclusion that, despite the availability of resources, one problem is "really not knowing the correct courses of action to take" (p. 193). We might use a study to guide our direction by inviting community members to be part of the research team, to offer other perspectives or interpretations of the data, or to help mediate between often disparate and conflicting socially-constructed views. As we try to obtain valid or true descriptions of lived orders, we need to use participants' socially-constructed views as elements of a unified voice to develop future treatment strategies.

Henderson, George, & Bryan, Willie V. *Psychosocial Aspects of Disability* (2nd ed.). Springfield, IL: Charles C. Thomas, 1997, 341 pages, \$64.95 hardcover, \$49.95 softcover.

Reviewed by Rhoda Olkin, Ph.D., Professor, California School of Professional Psychology.

This book, despite its promising title, was disappointing. But, first, what the book contains: The contents are organized into four parts. Part I, "Identifying the Problems," has four chapters ("Myths and treatment," "The nature of the problem," "Who are persons with disabilities?" and "Perceptions"). Part II on "Understanding the Problems" has four chapters ("Self-determination through legislation," "Ethnic group characteristics," "Coping styles," and "Organizations for change"). The third part is "Solutions to Problems" and has five chapters, each containing "Tips for" "Helping ethnic minorities," "Parents," "Teachers," "Human services personnel," and "People with disabilities." The last part is the "Conclusion" and has one chapter ("Final thoughts") and four appendices. Appendix A, "Famous deceased persons with disabilities," has 54 names, 18 of whom I have heard. At first, it seems interesting to learn that George Washington Carver, a scientist and educator who developed "hundreds of uses for the peanut" (p. 297) stuttered. But, ultimately, I have to ask what is the meta-message of this list? Appendix B is resources for people with disabili-



ties, and, like any such list, it ultimately seems somewhat arbitrary. Appendix C gives information on recreation associations. Appendix D is intriguing and more unique: "Disabilities quiz" (in which answers are provided without explanation).

I read the three-page preface looking, I confess, for signs of whether the authors themselves have disabilities. There was no definitive answer, but, from my reading of the book, I rather thought not. There was a slight us/you overtone that at times bordered on paternalistic. For example, the preface ends with this: "This book is our way of saying, 'Enough! Let us reach out and help our neighbors with disabilities and help them to help themselves.' This is not much to ask, but it will be everything to refuse" (p. ix). Also the following strikes me as an able-bodied sentiment: "They [persons with disabilities] cannot choose both the dominant culture and a subculture of disability without experiencing role conflict. Consequently, many persons with disabilities are suspended between the two groups, and *their dual membership is a hindrance to their rehabilitative and social integration*" (p. 284, emphasis added). The authors also credit Bell with advancing the cause of the deaf by insisting on teaching them speech. These are signs that the authors were not perfectly in tune with the disabled community.

No specific model of disability is discussed, and the book seems to veer back and forth between the medical and minority models. For example, the authors state that "more often than not, people with physical disabilities are occupationally rather than physically handicapped. . . . Our major focus is not on physical disabilities per se but the varying responses to them" (p. vii). Yet, a discussion of disability groups avers that "extremists [in the disabled community] believe that 'crips' and 'gimps' are lost in ignorance and must seek out their true identity, must gain control over their own economic fortunes by setting up their own living environments and businesses. This position does not have widespread support" (p. 285). Presumably, SDS would be a society of "extremists"?

Sentences such as the following speak for themselves, I believe, as to why I sometimes experienced a frisson as I read: "When [disability-oriented groups are] based on a rigid code of conduct (such as following approved rehabilitation programs, exhibiting well-mannered behavior, and abstaining from making negative comments about other people), disability-oriented organizations contribute to an orderly society. However, when based on ethnocentrism ('Disabled people are better.') and hatred, these organizations, like their able-bodied counterparts, are socially destructive" (p. 285). I guess we know how the authors would feel about ADAPT and Not Dead Yet.

A second problem is that the authors stray badly from their areas of expertise, and chapter titles are frequently misleading. Chapters promising focused information turn out to contain more general, non-disability material. For example, I eagerly turned to "Tips for helping ethnic minorities," looking for synthesized information on disabilities in the context of various ethnicities-Ba greatly needed discussion. Instead, I found that the chapter focused on general treatment issues with able-bodied clients of color. The chapter on "Tips for parents" is present because, as is so often the case, there is an assumption that the person with the disability is a child (of any age), and that other roles (e.g., parent, spouse) are conspicuously absent.

Another problem is that all research cited is treated as equal, regardless of its epoch or methodological integrity. For example, an important idea about attribution for attitude formation is supported by a citation from 1938 (p. 36). We are told that there is little support for stage theories of acceptance of disability (which is the case), but then are given a stage model of parents' responses to disability in a child.

Each chapter ends with a "Note to helpers," which is a nice idea. In practice, these sections are quite shallow. I quote one in its entirety to give a flavor of their depth. Chapter Five ("Self-determination through legislation") ends with: "All groups and individuals should be treated equitably.

Nothing should be done to create or perpetuate race, color, nationality, religion, sex, age, or disability stereotypes. Effective helpers show personal concern for all their helpers [sic]. They budget time to talk with and listen to them. Trust and respect are the essential characteristics of successful helps. In summary, they teach acceptance by living it" (p. 105). I could think of so much more that might be discussed vis-a-vis, for example, the independent living movement and its implications for the helping relationship. Also, liberal use of clinical examples (there are none) would help tremendously.

In sum, I cannot recommend this book. Although it has some choice ideas (e.g., the relationship between the Protestant work ethic and the high unemployment among persons with disabilities), they are not reliably found; and, in between, there is much that I found, at best, shallow and, at worst, disturbing.

Hillyer, Barbara. *Feminism and Disability*. Norman, OK: University of Oklahoma Press, 1993, 318 pages, \$16.95 softcover.

Reviewed by Margaret A. Nosek, Ph.D., Associate Professor, Baylor College of Medicine, and Director, Center for Research on Women with Disabilities, Houston, TX.

Barbara Hillyer is searching for a feminist explanation for the personal, familial, and social crises she has faced as the mother of a child with multiple mental and physical impairments. As founder of the Women's Study program at the University of Oklahoma and professor of feminist theory, she is well grounded in interpreting her experiences as a woman. Her approach to disability is secondary, however, as a mother and caregiver. Her intended audience seems to be those interested in women's studies, with much more effort given to explaining basic disability concepts than basic feminist concepts. Nevertheless, this academic text offers a wealth of information on feminist interpretations of issues surrounding women who care for disabled family members in our society.

Although Hillyer states that "mothers of disabled children are among the most politically active advocates of disability rights and among the most articulate interpreters of disability experience as well" (p. 86), there are several inconsistencies with the views of feminist disabled activists. Hillyer's opening query is, "What [does] it mean to be a whole person when your mind or body is incomplete?" (p. 5). The disability rights movement views each individual as inherently complete, making this a moot question. There is a pervasive tragic tone in the approach to disability throughout the book. Entire chapters are devoted to mother-blaming and grieving. These reflect Hillyer's perception of stigma in having a mentally retarded child, and her anguish over having to place her child in an institution.

Discussions of productivity, passing, denial, and normalization offer an interesting contrast of pros and cons for women with disabilities. Hillyer blames "radical advocates of independent living" (p. 107) for encouraging denial and for attributing their suffering to societal oppression, thereby preventing groups and individuals from forming a clear sense of their own identity (p. 112). She does not acknowledge that acceptance of disability, or not passing, can delay the realization of sisterhood and of perceived womanhood. She equates independence with autonomy, a male characteristic that is damaging to women, without mentioning research that equates independence with control, an aspiration that transcends gender.

In her effort to advance feminist theory, Hillyer struggles to validate her relationship with a child who cannot reciprocate. She mentions feminist principles such as "boundary living" and "transcendence," but she does not clearly articulate how issues of disability enrich these principles

and move us toward new theory.

The richness of Hillyer's experience as an authority on feminism and as a mother of a disabled child make for insightful observations about the role of caregivers and the situation of women who, due to cognitive impairment, cannot interpret their own experiences. This text brings into sharp focus the need to distinguish and document issues of disabled women who can speak for themselves versus those who cannot.

L'Institut Roehrer Institute. *Disability, Community and Society: Exploring the Links*. North York, Ontario, Canada: L'Institut Roehrer Institute (Kinsmen Building, York University, 4700 Keele Street, North York, Ontario, Canada M3J 1P3), 1996, 217 pages, \$29.00 softcover.

Reviewed by Ravi A. Malhotra, student, University of Ottawa Law School and M.A. Candidate, Norman Paterson School of International Affairs, Carleton University, Ottawa, Canada.

The Roehrer Institute, one of Canada's leading policy research organizations in promoting the equality rights of Canadians with disabilities, has recently released *Disability, Community and Society*, an articulate text that is likely to play a pivotal role in raising awareness and educating the general public about disability issues for many years to come. While no work can be truly comprehensive, *Disability, Community and Society* makes an admirable effort to discuss many of the most important social problems facing Canadians with disabilities at the dawn of the 21st Century, including the complex relationships between disability and poverty, housing, integrated education, employment, family support, violence, technology, relationships, and advocating for change. An appealing feature of the work is its aesthetically pleasing quality. Rather than simply providing a continuous block of text as in many academic works, virtually every page is embroidered with a sidebar containing a relevant quotation, an interesting photograph, or a detailed chart that enhances the argument in the text. Each chapter ends with useful suggestions for further reading and recommended videos on the topic in question.

There are also happily numerous signs of a basic understanding of the socio-political model of disability that sees physical and attitudinal barriers, rather than physical or intellectual impairments, as the primary problems facing people with disabilities. Acknowledgment of such formerly taboo subjects as, for example, the disproportionate violence experienced by people, especially women, with disabilities is particularly refreshing. It is to the authors' credit that a discussion of such relatively controversial issues as abortion of disabled fetuses and the Human Genome Project is included. Although the textbook feel of *Disability, Community and Society* may be distasteful to some, it is obvious that the quality of the chapters is consistently high. Nevertheless, a few weaknesses warrant some attention. First, the Roehrer Institute's project seems ambiguous. At times, one gets the impression that the book is intended as a general disability text, while some chapters seem to suggest that the book is specifically about intellectual disability. While many disability rights activists clearly need to expand their horizons and consider intellectual disability issues, some sections of the book may inadvertently convey the impression to a lay reader that all disability politics involves intellectual disability issues. Second, the discussions of the *Canadian Charter of Rights and Freedoms*, Canada's primary constitutional document on human rights, and law in general seem rather problematic and simplistic. Although the authors see the courts as an important vehicle for social change, it is far from clear that, in an era of severe government cutbacks, there is any longer much scope for change through litigation. Canadian commentators on the *Charter of Rights*, paralleling the Critical Legal Studies school that has emerged in the United States in recent years, are bitterly divided between optimistic *Charter* enthusiasts and more critical *Charter* skept-

tics who look more favourably on the tactics of grassroots political mobilization and struggle from below.

Still, one should make no mistake. The overall product is undoubtedly of a high calibre. While clearly aimed at a Canadian audience, many disability rights activists and scholars on both sides of the 49th parallel would be wise to read and consider the cogent arguments so elegantly discussed in *Disability, Community and Society*.

Jankowski, Katherine A. *Deaf Empowerment: Emergence, Struggle and Rhetoric*. Washington, DC: Gallaudet University Press, 1997, 205 pages, \$34.95, hardcover.

Reviewed by Sharon Barnartt, Gallaudet University.

This book tells the story of the radicalization of a portion of the deaf community and its transmogrification from a non-political and passive community to a social movement that the author calls the Deaf social movement. It is based on data derived from the rhetoric of the community, as expressed in documents, as well as on data recorded by the author herself as a participant observer to some of the events she describes. Coming from a Foucaultian perspective, the book shows how rhetoric itself can become empowering.

The book discusses the history of deaf education and, concomitantly, American Sign Language. It recounts the transition from deaf schools being controlled by deaf adults—not only permitting, but encouraging, the use of American Sign Language and, therefore, being empowering—to being controlled by hearing people and, therefore, being repressive. This shift, which began in 1880, led to the suppression of any sign language in the schools. Jankowski suggests that this emphasis on English parallels a growing resentment in the U.S. of immigrants, who also spoke languages other than English. She shows how concepts of normality were used to define Deaf people as subnormal and, therefore, to segregate them—which the deaf community used to its own advantage. Many organizations were formed in the deaf community at this time, a fact which Jankowski points to as an indicator of resistance to control by hearing people over education. She shows how these organizations, and the segregation of the deaf community, helped to form the basis for subsequent social movement activity.

By the 1960s and 1970s, the rhetoric of “segregation” and “integration” had surfaced in the Black civil rights movement. Paralleling a value on integration, deaf education saw growth of the philosophy of “total communication,” in which signs are attached to English words and are used in English, rather than in ASL, word order. When linguists began to realize that ASL was itself a language, and neither an argot nor a dialect of English, this set the stage for deaf people to fight for separation, rather than integration. In the era when the mainstreaming of children with disabilities became the norm, the sign for “mainstreaming” was transformed by Deaf activists to a sign which indicated oppression of deaf children by the hearing schools in which they were placed. Definitions of mainstreaming as “cultural genocide” and the development of the notion of deaf people as bilingual and bicultural set the stage for the full-blown resistance to control by hearing educators that occurred at Gallaudet University in 1988. The book analyzes the Deaf President Now (DPN) protest using not just the events, but also poster and newspaper cartoons. It illustrates the rhetorical positions that underlay the actions, which contributed to the success of the protest, and which fueled the growth of the Deaf social movement.

Since DPN, Jankowski sees the deaf community as adopting diversity strategies that again came from the Black community, albeit now, its separatist movements. She shows how, in signs and jokes, the deaf movement attempts to increase feelings of self-worth, and she shows how the

deaf community has rejected the pathological view of deafness implicit in cochlear implants. As protests have spread to school and other locations, the rhetoric of "communication violence" and "communication abuse" has also spread (p. 154). The movement has come to demand "full and equal participation on its own terms" (p. 156) by such strategies as agencies only using TDDs for communication and the development of Deaf Studies program, and it has also tried to separate itself from the disability movement.

The story Jankowski tells is basically familiar to people who are knowledgeable about the deaf community. She puts a slightly different spin on it by her analysis of rhetoric—but, while that is the strength of the book, it is also its weakness. Social movements are more than rhetoric. While it is true that, until recently, much of the social movements literature proceeded as if social movements had no ideologies, this book goes too far in the other direction. It shows little knowledge of how the social movements literature treats the action aspects of social movements or how it treats the rhetoric or ideologies. In the latter area, recent work that has focused on ideological "frames" and why they succeed or fail would be relevant to this book.

The other major problem with this book is that it presents a picture of what is happening in only one part of the Deaf community—and it ignores completely people with hearing losses who are not part of that community at all. While Jankowski, in the last chapter of the book, acknowledges that there are "pervasive divisions" in the deaf community (p. 171), those are not discussed, and their possible impact on this social movement is not analyzed.

However, the book presents a good introduction to the history and politics of the Deaf movement for those who are not familiar with it. It makes a strong case for distinguishing the Deaf movement from social movements occurring in the disability community. It should be read by anyone who wants to know why this political and ideological split between deaf people and people with other types of physical impairments is occurring.

Jepson, Jill, ed. *No Walls of Stone: An Anthology of Literature by Deaf and Hard of Hearing Writers*. Washington, DC: Gallaudet University Press, 1992, 240 pages, \$24.95 hardcover.

Reviewed by Karen Christie, National Technical Institute for the Deaf, Rochester, NY.

The expectations that readers might have picking up a copy of *No Walls of Stone: An Anthology of Literature by Deaf and Hard of Hearing Writers* would indicate a great deal about their own world view and their view of deaf people.

This collection of poetry, short stories, and essays, edited by Jill Jepson, displays the work of 23 contemporary deaf and hard of hearing writers. Only David Wright, Frances M. Parsons, Hannah Merker, and Robert F. Panara (whose clever "Lip Service" appears here) have been widely published. Each author's work is prefaced by brief biographical notes. These notes list the writers' etiology and degree of hearing loss; however, they lack information vital to understanding the writers from a Deaf cultural perspective. Such a bias is also evident in the anthology's introduction.

Readers curious about what "not hearing" is like, and people who have become deaf later in life will find most of the works in this anthology appealing. Writers Claire Blatchford, Edna Shipley-Conner, David Wright, Karin Mango, and Mary Holmes all eloquently address this experience. When one writer asks, "How can I tell you about something that is not there" (p. 215), many readers will wonder why so many works address just that.

Unique and impressive in the tremendous variety of poetry are the contributions of Peter Cook and Joseph Castronovo. These poems were created in American Sign Language and translated for publication in English. These literary works, in addition to those of others, such as Willy

Conley, testify that, indeed, there is a Deaf literary tradition in written English, and literature that affirms Deaf cultural values can be shared and appreciated by all people.

The artistry of the works presented in this volume clearly indicates that these individuals are gifted writers, writers who—though they may share a common physical trait—are infinitely more divided by their cultural differences.

Lucas, Ceil, ed. *Multicultural Aspects of Sociolinguistics in Deaf Communities*. Washington, DC: Gallaudet University Press, 1996, 245 pages, \$39.95 hardcover.

Reviewed by Tracy K. Harris, Associate Professor of Spanish and Linguistics, Bradley University, Peoria, IL.

This book is a collection of eight essays that deal with different sociolinguistic and sociocultural aspects of Deaf communities. In Part 1 on variation, Kleinfeld and Warner examine issues of appropriateness and political correctness as well as the connotations and uses of 11 gay, lesbian, and bisexual signs and their variants.

In Part 2 on multilingualism, Branson, Miller, Marsaja, and Negara discuss *kata kolok*, the sign language in a north Bali village that is not derived from and is independent of the oral language of the region. The authors emphasize that the Deaf people in this village are not considered inferior and are an important part of all aspects of village life. The case of *kata kolok* provides an opportunity to study how sign language develops when Deaf people are not considered to be pathological or disabled.

In Part 3 on language in Deaf education, Oviedo examines the problems of a bilingual model of education in Venezuela for Deaf students in which most of the teachers are hearing and do not have a good command of VSL (Venezuelan Sign Language) grammar. Thus, they often use Spanish grammatical strategies in the form of manual signs to introduce arguments instead of the nonmanual strategies used in VSL, a phenomenon that impedes complete understanding between teachers and Deaf students.

In her article on how Deaf children define words, Schley reports that the children do not use any synonyms in their ASL definitions, but, instead, give examples describing the function of the words. There appears to be no distinction between dictionary-like definitions and informal definitions in ASL discourse practice, a fact that may have implications for literacy in English and for educational policy for the teaching of Deaf students.

In Part 4 on discourse analysis, Mather investigates how teachers, when reading stories to Deaf students, provide a sense of involvement by using visual means. She examines the use of constructed dialogue (role playing and role shifting) and the kinds of initiation regulators (eye gaze signals, etc.) that are most effective in engaging the students' attention.

In his article, Celo presents two combined types of aspect in Italian Sign Language interrogative forms: syntactic aspects, which are expressed by nonmanual components; and pragmatic performatives, which are expressed by manual signs. He emphasizes that Deaf people focus on nonmanual sign language components such as eye gaze, eyebrow movement, head and shoulder movement, torso positions, mouth opening, and facial expressions. Celo's research also suggests that there is a particular sign that introduces interrogative intent similar to the inverted question marks used in written Spanish.

By using different models of analysis derived from the data of spoken languages, Wilson analyzes the structure of an ASL narrative. She examines the role of pauses, which divide the narrative into sections, and the narrator's use of constructed dialogue, which regulates the structure and length of stanzas in an ASL narrative. Wilson has found that both constructed dialogue and pauses also play important roles in evaluating the narrative.

In my opinion, the best article appears in Part 5 on second language learning, which presents ASL for consideration as a "truly foreign language." Jacobs makes a distinction between knowing signs and knowing ASL, which is very different from English in both grammatical form and structure. She discusses problems encountered by the hearing English-speaking learner of ASL, and she rates ASL as a category-4 language, having a difficulty level similar to that of languages like Chinese and Japanese, which require more contact hours to attain a minimal level of proficiency. She criticizes the lack of good interpreting programs for ASL-English in the U.S., the minimal ASL instruction at the university level, and the absence of a standard proficiency test to measure ASL skills.

But more important is Jacobs' discussion of the fact that, even though Stokoe recognized ASL as a language in its own right as long ago as 1960, ASL is still often considered to be a language used by disabled persons. As Jacobs writes: "It is difficult for a language to achieve recognition on its own merit when its users are seen as disabled by the larger society" (p.200). Thus, ASL is still struggling for acceptance as a true foreign language. She points out that Deaf people are never classified as a minority group having their own language and culture, but rather as members of a disabled group. In order for Deaf people to achieve full equality, the Hearing society must "depathologize" deafness by not accepting the "handicapped classification of Deaf people" (p. 202).

This point about not viewing Deaf people and their sign language as aspects of a "disabled" culture is mentioned in other articles, as is the importance of studying and teaching the nonmanual components of ASL. The collection of essays in this book is generally a good one, albeit a bit disjointed and unrelated. The essays examine several important sociolinguistic issues in Deaf communities throughout the world that have implications for language and cultural studies in general.

McConway, Kevin, ed. *Studying Health and Disease*. London, England: Open University Press (Distributed by Taylor & Francis, 1900 Frost Road, Suite 101, Bristol, PA 19007-1598), 1994, 148 pages, \$25.95 softcover.

Reviewed by Kristine A. Mulhorn, Ph.D., MHSA, Assistant Professor, Health Care Department, The University of Michigan, Flint.

*Studying Health and Disease* fulfills the basic necessities of an introductory research methodology text for students interested in research on health issues. Its strengths can be highlighted by including all those concepts and issues that must be discussed in any introductory course on research methods—reliability and validity, qualitative versus quantitative methodology, and inductive versus deductive reasoning. It is appropriate for students in the social sciences as well as for those in health-related professional fields. Its major area of weakness is its lack of references to current issues important to the study of health and illness in the U.S., such as access to prenatal care, and violence as a significant social source of illness. This is largely explained by the fact that the book was published in England.

*Studying Health and Disease* is clearly a strong sample of a well-rounded text for bachelor's level students. As a teaching tool, it contains clear learning objectives and sample questions for

each chapter. However, the number of questions is limited, so supplemental exercises may be necessary.

The book completely covers important areas of study for students in the health sciences, such as demography, epidemiology, and biomedical research, topics that are not necessary in other methods texts. In addition, the illustrations are good. For example, there are sample population pyramids in the demography section, and the classic map of the Soho region describing the spread of the cholera epidemic of 1848.

Unfortunately, the book includes little discussion of disability, and, consequently, there are no study questions about the measure of disability or the relationship between chronic conditions and disability. In addition to an overall question about health status, readers learn that there are four other aspects of health addressed in surveys: unfitness/fitness, disease/disability, illness, and psycho-social health.

The depth and scope of *Studying Health and Disease* call for a recommendation. However, in addition to the problem indicated earlier, another deficit is a less-than-thorough discussion of evaluation research. My overall recommendation is strong, but it is stronger for persons teaching in the United Kingdom, the locale for many of the real-life examples.

Schwartz, Sue, ed. *Choices in Deafness: A Parents' Guide to Communication Options* (2nd ed.). Bethesda, MD: Woodbine House, Inc., 1996, 304 pages, \$16.95 softcover.

Reviewed by Cindy J. Smith, Ph.D., Assistant Professor of Criminal Justice, University of Illinois at Springfield.

*Choices in Deafness: A Parents' Guide to Communication Options* provides parents with an unbiased presentation of the various methods of communication available for deaf children. Parents of deaf children must make the communication modality decision for their children and are often forced to do so with limited or biased information. This book provides parents with vital information regarding available methodologies in a usable, conversational format. The authors suggest that parents choose the methodology with which both the child and the parents are the most comfortable.

The book begins by describing the biological, genetic, and physiological information necessary to arm parents with the vocabulary and basic knowledge needed to effectively communicate with their child's doctors and audiologists. The text encourages parents not to underestimate their instincts about their child's deafness. Accordingly, if parents have concerns about the correctness of their child's diagnosis, the book suggests that parents voice these concerns and not be afraid to seek further medical opinions. The audiological information is somewhat repetitive, which makes the chapter slightly confusing. Overall, the book is written in a conversational format, presenting necessary technical information in such a way that it is easy to read and understand.

The book presents five communication options for deaf individuals: auditory-verbal, bilingual-bicultural, cued speech, oral, and total communication. An expert in the field presents the pros and some cons of each methodology. The text is successful in presenting the attributes of each method without degrading the other methodologies. Following each formal presentation, the editor repeats, from the first edition of the book, several brief stories by parents who have made that particular communication decision for their deaf child.

Uniquely, this edition follows the parental perspective with a brief biography from the child's perspective ten years later. Every parent of a deaf child should read this book at some time in his or her life. It supports parents who are making the communication modality decision, and it provides



reassurance and support for those of us who made our decisions many years ago.

Shrey, Donald E., and Lacerte, Michel, eds. *Principles and Practices of Disability Management in Industry*. Winter Park, FL: GR Press, Inc. (Distributed by St. Lucie Press, 100 E. Linton Boulevard, Suite 403B, Delray Beach, FL 33483), 1995, 658 pages, \$96.00 hardcover.

Reviewed by Nancy R. Mudrick, Professor, Syracuse University.

According to the editors of this large volume, disability management is "the proactive process of minimizing the impact of injury, disability, or disease on the worker's capacity to perform work" with the goal of protecting the "employability of the worker, while preserving the financial interests of the employer" through programs and services provided at the worksite (p. xvii). "Disability management is an interdisciplinary concept that includes physical, emotional, vocation, medical and organizational factors that impact on employment" (p. xvii). While the focus of this text is clearly on working with individuals and employers in situations where the worker's disability is a consequence of work-injury, illness, or other event following initial employment, there is much about the perspective of disability management that is congruent with a disability rights perspective. The chapters in this text emphasize the work environment and job accommodations as key factors in promoting continuing employment. The authors all take the perspective that following a worker's onset of disability, the employer should be facilitating the employee's return to work, rather than pushing for his or her withdrawal from the labor force on income benefits. While some of the services described are focused on the rehabilitation of the individual, many pages in this book are devoted to instructions about what employers and their disability management specialists should be doing in the work environment. These instructions include not only architectural, ergonomic, and task modifications, but working with the other employees to produce a smooth and discrimination-free workplace re-entry as soon as possible.

It would appear that the target audience for this book is the professionals involved in the medical treatment and rehabilitation of injured workers and the employers of these workers. Many of the chapters are written in a "how to" style with lists of steps that should be taken in the performance of disability management. There is also a sales pitch quality to the text. The authors appear to be trying to convince both employers and professionals traditionally involved with work injury that disability management is a method superior to what they are currently doing. Many chapters seem to cover the same ground: definition of disability management, the roles and skills of the various professionals, the roles and obligations of the employer, and the steps to follow in the course of working with an individual in a disability management framework. There is little reflective or critical in these glowing outlines of disability management, nor is there an acknowledgment that disability management is controversial in some quarters because it is viewed primarily as a coercive effort to save employers on health insurance and Worker's Compensation costs.

Altogether there are twenty-one chapters in this edited text. The first chapter, by Donald Shrey, provides an excellent overview of disability management, its philosophy and methods. In fact, it is for this reason that many of the chapters that follow seem repetitious. Other chapters I thought noteworthy include a chapter on historical perspectives by J. Havranek; a chapter on the interaction of health insurance, Worker's Compensation, and the ADA by B. McMahon; a chapter on managed care by DeMarco and Wolfe; and the final chapter, titled "An International View of Work Disability: Trends and Implications for Worker Rehabilitation," by A. Remenyi. I suspect I liked these chapters because they offer an analytic and research-based perspective on our sometimes conflicting disability laws and programs. While strong arguments are made in this book that employers

should accommodate the disabilities of their workers post-injury or post-illness, absent from the discussions is any reference to hiring and accommodating an individual who already has an identified disability. This text leaves the impression that the disability management field is not interested in working with employers to ensure that they also *hire* people with disabilities.

Stewart, Moira, Brown, Judith Belle, Wester, W. Wayne, McWhinney, Ian R., McWilliam, Carol L., and Freeman, Thomas R. *Patient-Centered Medicine: Transforming the Clinical Method*. Thousand Oaks, CA: Sage Publications, Inc., 1995, 264 pages, \$48.00 hardcover; \$23.95 softcover.

Reviewed by John D. Stoeckle, Physician, Massachusetts General Hospital, Boston, MA.

Stimulated by audiotapes of the practice of a family doctor, this book from the Department of Family Medicine, University of Western Ontario, contains: (1) a history of disease diagnosis, (2) guides to practice tasks that define what is called a "patient-centered medicine," (3) how to teach it, and (4) how it might be researched.

After a historical review of the clinical method, of disease diagnosis from symptoms and signs that later were defined by abnormal tissues and tests, McWhinney argues that disease-centered diagnosis needs a re-definition for practice (in which the patient also defines the illness) and for moral reasons (to include the patient in decision-making). In sum, "transformation" is from the method of disease diagnosis, a discovery process, to tasks of care, in today's new rubric, "patient-centered medicine."

The authors define the transformation by guides for doing care: (1) exploring both the disease and the patient's illness experience, (2) understanding the whole patient, (3) finding common ground in management, (4) incorporating prevention and health promotion, (5) enhancing the doctor-patient relation, and (6) being realistic.

Yet, these excellent guides do not seem a transformation. The list itemizes what has been called medicine's "quiet art," restating the humanistic tasks of care that have been ancient themes alongside the diagnosis of disease. Since the 1900s, when the case method of learning reformed medical education, such guides have been addressed by Cabot, Robinson, Peabody, and Whitehorn, and psychiatrists from the 1950s such as Engel, the Bibrings, and Balint. Insiders, they have all written of "patient-centered" practice acts. From outside came the patient as partner with the anti-authoritarian 1960s; as informed subject with accountability ethics of the 1980s; as consumer with the market changes of the 1990s; and, with the disability rights movement, patient access to service institutions.

If the "transformation" has happened, it might be argued less so in the medical school focus on acute disease in hospitals, unlike the family practice focus on chronic illness and prevention outside.

History aside, the chapters that follow are case-illustrated examples of the uses of "patient-centered medicine" in the care of patients, followed by chapters on its teaching-learning, and on research.

This book should guide students, practitioners, and teachers towards communication and acts of care that may not already have been taught in the hospital, with care so focused on acute disease. Today's chronic illness and disablement outside the hospital will require patient-centered care, as that is where so many patients are, and they have always had to do it.

Van Campenhoudt, Luc, Cohen, Mitchell, Guizzardi, Gustavo, and Hausser, Dominique, eds. *Sexual Interactions and HIV Risk: New Conceptual Perspectives in European Research*. Bristol, PA: Taylor & Francis Press, 1997, 266 pages, \$24.95 softcover.

Reviewed by J. Gary Linn, Ph.D., Associate Professor of Nursing, Tennessee State University.

Research into HIV/AIDS risk-related behavior needs more theories, but researchers and prevention educators are skeptical of theories. In this volume, European investigators provide new conceptual frameworks that focus on interactions between partners and among social networks, and they describe their application to HIV/AIDS prevention programs. The book also includes a critique of the individual-oriented theories that have dominated HIV-related behavioral research and prevention programs for the past decade. The authors concede that individual characteristics exert influence over behavior, but it is their contention that these characteristics become important only in the interactions between partners and among peers, in a particular sociocultural context.

This edited work is useful both theoretically and practically, and it contributes toward structuring an emerging scientific field of interaction-oriented views of sexual behavior. The compilation is organized into four sections, each with an introduction, original contributions, and a summary and discussion chapter. The first subdivision, "Sexual Interaction and HIV Risk-related Behavior," provides several theoretical concepts that focus on the interaction process. The introduction to Part I and the discussion in Chapter 4 provide the main theories that are used to organize the theoretical field throughout the entire volume. Part II, "From Individual to Interaction," critiques individual-oriented theories as its point of departure, and demonstrates how the results of research guided by such theories both contradict and complement interaction-related investigations. Part II concludes with a discussion of the rationality of sexual behavior.

Part III, "Interaction and its Sociocultural Context," studies the linkages between macro- and micro-social processes. In Chapter 10 the theoretical and operational connections between interaction-oriented processes, individual-oriented processes, and social and cultural contexts are described. Part IV, "From Theory to Prevention," focuses on the ways that prevention educators can include interaction-oriented theories in HIV prevention programs. This section describes the process of creating, diffusing, and enforcing safer sexual norms, given the contradictions between preventive messages and the belief systems that underlie them. It emphasizes the significance of building prevention programs based on the priorities of those who are the targets of prevention programs and determining when and what types of prevention are relevant. Further, Part IV underscores the general message of the book that it is time to move from individual-oriented prevention based on the linear associations between safer sex and knowledge, attitude, beliefs, and behavioral factors. The new perspective offered here is that of HIV prevention based on comprehending the meaning and dynamics of these factors in specific situations in which sex is the outcome of interactions between partners and among social networks.

*Sexual Interactions and HIV Risk* provides a provocative new perspective on AIDS prevention. It should be of interest to all researchers and practitioners in this increasingly important area.

Wahl, Otto F. *Media Madness: Public Images of Mental Illness*. New Brunswick, NJ: Rutgers University Press, 1995, 237 pages, \$25.95 hardcover, \$17.00 softcover.

Reviewed by Elaine Makas, Adjunct Associate Professor of Psychology, Lewiston-Auburn College of the University of Southern Maine.

In *Media Madness* a psychologist who is actively involved with mentally ill people and their families expresses frustration over the countless misleading portrayals of mental illness by the media. Unlike some who have written on the same topic, however, the author goes beyond a simple litany of misinformed presentations by asking “So What?” and “So Why?” (in chapters by these titles), and by offering practical strategies (in a chapter titled “Future Images”) to reduce this frustration.

Wahl’s observations are valid, and he supports them with research results and by specific examples drawn from recent as well as classic media portrayals. His sincerity (and his generous nature) are apparent throughout the book. He addresses the harmful impact of negative media images on individuals with mental illness, their families, and their friends, and on mental health goals, but he carefully notes that these negative portrayals are probably not the result of intentional malice on the part of media writers, editors, or producers. These media professionals, Wahl explains, are just as likely as the general public to be misinformed about mental illness and those experiencing it. This allows the author to offer potential and practical solutions to the problem, rather than just complaining about it. He even takes this generosity a step further by acknowledging the role played in the perpetuation of these negative images by his mental health colleagues. For example, he cites Janet Colaizzi (on pp. 118-120), who suggested that mental health professionals have a vested interest in maintaining the stereotype of mentally ill people as dangerous (to expand their authority over their own patients, and to guard against possible lawsuits if a patient or former patient does become dangerous).

All in all, Wahl’s book is a valuable addition to the literature. It is a good book, but not a great one, a contribution that will certainly open some eyes to the largely-ignored problem of inaccurate and misleading depictions in the media of mental illness and mentally ill people.

The book is incomplete and somewhat redundant in its enumeration of negative and misinformed images. Wahl does a wonderful job of clarifying the huge difference between schizophrenia and multiple personalities, an extremely inaccurate analogy perpetuated by the media—a confounding of terms that frustrates anyone who has ever taught introductory psychology and has wasted valuable class time unraveling these two very distinct psychological problems. Wahl also makes an important contribution to dispelling two myths: that the majority of people with mental illness are dangerous and violent, and that they are decidedly different than “us.” How I wish that he had continued in this vein—by correcting (or attending at more length to) the erroneous perceptions of many other psychological problems (e.g., mania, mania-depression, obsessive-compulsive disorder, personality disorders, to name a few). Or that he had addressed more fully other, equally damaging stereotypes of people with mental illness (e.g., over-dependence, uncontrollable sexual urges, lack of productivity, lack of any vestiges of “normalcy”).

These omissions, however, are somewhat counterbalanced by the completeness with which Wahl addresses the topics and stereotypes covered. I am particularly impressed by his broad view of the media to encompass literature, news articles and TV news coverage, and music lyrics as well as the more-frequently discussed media of fictional TV and film. (One must read several books, for example, to learn about portrayals of physical disability in a wide range of media.) I also like Wahl’s attentiveness to explaining why these images need to be corrected (in his “So What?” chapter) and how these images originated and why they perpetuate (in his “So Why?” chapter). These chapters are occasionally redundant—perhaps because the negative portrayals being discussed are somewhat limited—but I can easily forgive this redundancy (and, in fact, say “So what!”) in consideration of the valuable information included in these chapters.

Sincere kudos, also, to Wahl for concluding this book on such a positive note, by giving examples of mostly successful efforts that exhibit cooperation between media professionals and

mental health advocates to replace inaccurate and damaging images of mentally ill people with more accurate and helpful depictions.

And last, but certainly not least, I commend Wahl on his writing style. After many hours and days of sitting through presentations by my colleagues at various psychological association meetings, it is refreshing to find a book written by a psychologist that is both readable by the public and non-patronizing.

I encourage Dr. Wahl to persist in his crusade against harmful and inaccurate media images of mental illness and those experiencing it, and to continue his writing, expanding on the types of images presented and on explanations in lay terms of other psychological problems. I also encourage DSQ readers to read this book, and (if they agree with my assessment) to spread the word on its availability and its accessibility, particularly to media professionals.

Webster, Charles, ed. *Caring for Health: History and Diversity*. Buckingham, England: Open University Press (Distributed by Taylor & Francis, 1900 Frost Road, Suite 101, Bristol, PA 19007-1598), 1993, 224 pages, \$27.95 softcover.

Reviewed by Martha L. Edwards, Assistant Professor of History, Truman State University, Kirksville, MO.

*Caring for Health* is one in a series of textbooks written for the Open University in Britain. Used by students in a course on "Health and Disease," it is also intended for the general reader.

*Caring for Health* has ten chapters, most written by medical historians and researchers, and it is built on a framework of themes such as the intersections between lay and formal health care, the professionalization of health care, and the impact of European models of health care on non-European parts of the world. The first half provides an overview of health care systems in the United Kingdom and their spheres of influence from about 1500 to the present; the second half describes the present state of health care in developed and developing countries.

In a book with "diversity" as part of its title, it is surprising to find that "disability" is not even an entry in the index. Disability is mentioned only in passing; for example, physically disabled people are included in the vulnerable groups needing positive discrimination along with "minority ethnic groups, elderly, mentally handicapped, [and] mentally sick" (p. 15). The history of lunatic asylums is narrated uncritically (e.g., pp. 55-56). The account of Darwinism and the development of eugenics (pp. 63-66) without reference to its relation to disability is odd, at best. In short, the history of people with disabilities and their relationship to health care is all but invisible.

*Caring for Health* provides a clear history of institutional health care in Britain, but it does not touch on the history of underlying assumptions about health care. Furthermore, the general reader might be put off by the study questions interspersed throughout the text and the key terms in bold print, as well as the references to course components such as a series of articles in a reader. In other words, it is not a particularly good read. For the reader interested in Disability Studies, it may be useful as a provider of background information.

Wilkinson, Sue, and Kitzinger, Celia, eds. *Women and Health: Feminist Perspectives*. Bristol, PA: Taylor & Francis, 1994, 209 pages, \$24.95 softcover.

Reviewed by Jeanne Neath, Research Assistant Professor, National Center for Employment and Disability, University of Arkansas, Fayetteville.

*Women and Health* grew out of a 1992 symposium at the Annual Conference of the British Psychological Society. However, the editors sought additional articles following the conference, and the result is a broadly-based scholarly anthology containing theoretical analyses, reviews, and empirical work from a wide variety of disciplines including psychology, sociology, social policy, social anthropology, and economics. All of the contributors are British, and all work from a feminist perspective. The editors emphasize that this anthology is not just another book on women and health, but clearly feminist, with all contributors acknowledging "gender-based inequities" and the "need for social and political change."

This anthology includes articles covering many stages of the lifespan. For example, the articles address obstacles to safe sex among young heterosexual women, the impact of pregnancy on fat women's body image, new reproductive technologies, menopause and hormone replacement therapy, breast cancer, and physical and psychological health of widows. The emphasis on particular groups of women, rather than on women as a broad category, is also evident in several articles that address, in considerable detail, class and age differences among women. Contributors to this volume were asked by the editors to address race, class, sexual identity, age, and disability in their chapters, and different contributors did so to varying degrees.

Among the more interesting articles is a study of the experience of pregnancy among fat women. (The term "fat" is used rather than "overweight" or "obese" because it is a less value-laden term.) Many of the women interviewed reported less dissatisfaction with their weight during pregnancy, in part, because of greater social acceptability of fatness for pregnant women than for women who are not pregnant. Other factors influencing self image were worries about losing the weight gained during pregnancy and advice and comments (often negative) from medical professionals. Another notable article discusses class and gender differences in smoking, documenting the importance of smoking as an aid in coping with difficult life circumstances among lower class British women.

Particularly relevant for Disability Studies is the recurring feminist critique of the medical profession found in this collection. One article, for example, documents the tendency among doctors to overemphasize the role of psychological factors in women's illnesses. Another article critiques the common emphasis among male medical doctors on the "disfigurement" of post-mastectomy women and the importance of reconstructive breast surgery for women's self esteem and their male partners' "comfort." Also of particular interest for Disability Studies is a feminist critique of new reproductive technologies (especially in vitro fertilization), and the failure of scientists and ethicists to consider the impact of these technologies on women's experiences, focusing instead on the embryo and on "progress."

*Women and Health* is a solid, but not earth-shaking, collection of feminist thought and research on women's health. All of the articles were competently prepared, though the quality of the articles varies. The several empirically-based articles provide more information unavailable elsewhere than the other articles.

Wolcott, Gary, Lash, Marilyn, and Pearson, Sue, eds. *Signs and Strategies for Educating Students with Brain Injuries: A Practical Guide for Teachers and Schools*. Houston, TX: HDI Publishers (1-800/321-7037), 1995, 107 pages, \$24.50 softcover (quantity discounts available).

Reviewed by Beth Franks, Assistant Professor, Hobart & William Smith Colleges, Geneva, NY.

The cover of *Signs and Strategies* captures the eye. Geometric templates overlay bright fragments of color, suggesting the shattered images students with brain injuries might encounter when

they return to school. Inside, bold-faced headings, large print, and broad margins make *Signs and Strategies* an accessible introduction to a difficult subject. This book is both visually and conceptually well organized. Lists, worksheets, and case studies prepare teachers and parents for some of the complications that can arise when students with brain injuries re-enter school. Written in straightforward, jargon-free language, this manual focuses on a problem-identifying, problem-solving approach.

*Signs and Strategies* emphasizes the need for teamwork in easing students with brain injuries back into their school environments. Its aim is to “bridge the gap between hospitals and schools” (p. 9), and it does so without fuss, guiding the reader from the hospital, which focuses on rehabilitation, to educational settings, where most participants will be unfamiliar with the needs of students with brain injuries. The emphasis is on teacher-to-teacher or teacher-to-parent communication, although the book will be useful to parents as well, since it provides guidelines to questions teachers *should* be asking. To fully assist students with brain injuries, teachers need to know about the students’ behaviors at home, their current goals, and their views on how well they have adjusted to school.

In Chapters 2 and 3, the authors explore changes that teachers might encounter in students with brain injuries. Chapter 2 introduces each change (e.g., depression, forgetfulness, sexually inappropriate behavior) with a description of how the student might behave in school, and it follows the description with a list of questions. A case study, which includes practical suggestions, illustrates each change. The authors make a distinction between questions teachers might ask and questions parents might ask for some of the changes. Since I thought the distinction between teacher-questions and parent-questions was helpful, I found it odd that this pattern was not followed throughout the chapter. In a few areas, e.g., “sexually inappropriate behavior” (p. 26) and “cannot follow directions” (p. 32), the authors provide very few guidelines. This caused me to wonder whether they had run out of ideas or if the field itself has accrued little practical information.

Chapter 3’s author provides further elaboration on managing changes in students’ behaviors. The discussion begins with a simple, but clear diagram of the brain, locating areas of injury and linking this with possible consequences for schooling. This chapter contains both suggestions that teachers can make to families and practical strategies that teachers can use in school. For example, a teacher might use a “buddy system for redeveloping appropriate social skills” (p. 48), using more than one peer so the responsibility is distributed among several students. Most of the suggestions are simply good teaching practices—those sensitive to student needs and tailored to fit individual students. Through their very simplicity, suggestions such as these assure teachers that they already possess many of the skills necessary for teaching students with brain injuries.

In reading this volume, I felt ambivalent about the ratio of print to blank paper. On the one hand, the book seems expensive for the limited amount of text; on the other, using space to enhance organization works well. Judicious use of space makes information easy to locate and invites comment from the reader. Although 22 pages of worksheets may seem unnecessary, in this case the worksheets are helpful.

It was in the worksheet section that I finally found some acknowledgment of the emotional impact the injury can have on the family. One of the most devastating of injuries, a brain injury will have long-term emotional consequences for families, peers, and school personnel. Rather than an oversight, this late acknowledgment of the emotional impact seems a deliberate and sensitive decision on the part of the authors. Once teachers and families have confidence that much can be done, facing the emotional consequences becomes more manageable.

Although teachers and parents who are looking for technical information on brain injuries may be disappointed by what the authors provide, *Signs and Strategies* is a text that novices to the

field will find most useful.

Wrigley, Owen. *The Politics of Deafness*. Washington, DC: Gallaudet University Press, 1996, 289 pages, \$49.95 hardcover.

Reviewed by Tanis Doe, Pearson College, Victoria, BC, Canada.

Far be it for me to criticize a book by the words between its covers, but the style of writing bears more than partial responsibility for a book's utility. *The Politics of Deafness* is a controversial book for many reasons, not the least of which is how inaccessible it is to many Deaf people, due to its mostly muddy metaphorical medium. It is also controversial because the hearing American author spent many years interacting with Deaf Thai, and he bases much of his analysis on his critical ethnography of experiences on the margins and deconstructions of the other. On first reading (and, trust me, it will take more than one to process this text), the author seems to have discovered post-modern linguistic tools, the Internet, and de/re-constructionism after his personal/professional baptism into "the body of deafness" and to have decided to paint a la Kidinisky on the topic(s). As I re-read and re-read chapters, paragraphs, and even lines, I asked myself two questions: Could I sign the meaning of this to a Deaf friend with any semblance of integrity, and could I explain the meaning to a student in a class I teach? Although I could often answer yes to both "tests," I frequently answered no and felt frustrated at my own incompetence. I also felt irritated at the author for creating a work semi-inaccessible to literate scholars. In fact, this book, titled *The Politics of Deafness*, requires neither fluency in disability academic language nor familiarity with the terrain of Deaf culture, but rather a good post-modern dictionary or literacy in such un/de/anti/no jargon. After all, language makes us who we are, doesn't it? ;-)

I struggled so hard to understand the allusions, metaphors, and clever use of language because I knew deep down somewhere that there were important points with which I probably would agree. And, if I did not agree, I wanted to be able to critically analyze and needed first to understand. Most of Wrigley's general points follow from the now popular (among Deaf academics) Deaf rights model of Deaf culture as a linguistic and cultural minority. He is clear on this point and supports it with numerous historical and literary references. He discusses the construction of Deaf/deaf identities through the consensual differentiating between use of sign language and inability to hear. His definitions, while controversial and loaded, are his, and they are used consistently throughout the text. Never pretending to be unbiased, Wrigley clearly supports the rights of Deaf people to use and to be educated in a natural sign language. He shows how the medical and special educational models have tried (and usually have failed) to make Deaf children into hearing or hearing-like adults. He also discusses the metaphorical and actual experimentation with cochlear implants as a post-modernist denial of the Deaf body. Most of his criticisms of the dominant model are solidly rooted in other people's work, and he regularly gives credit to his Deaf colleagues, mostly Thai Deaf people with whom he worked on the creation of a sign language "dictionary." What seems to be "new" or revealing is his use of post-modern analysis and Hegelian dialectics to show the oppressive tactics of the dominant paradigm and the suppression of the reactive Deaf rights perspective. He illustrates, for example, how the Deaf community has its own "citizenship" requirements and ethnic purity that construct barriers to membership among the less than truly Deaf.

An inter/intra-cultural knowledge base is shown through examples of the Thai struggles for recognition of sign language as a language, the fight for interpreters and services, and the differences between "rights" and "fairness" in Thailand. Applying this knowledge to the American, North American, and even Western world has some particularly useful possibilities, considering



the current backlash around integration, segregation, and Deaf education. Wrigley very rightly points out how Euro-centric and American-based most of the Deaf history and Deaf educational politics have been in the last hundred years. The masses of Asia, Africa, and South America have constructed their own deaf bodies and Deaf histories, which remain largely unknown. Using examples from the streets of Bangkok, Wrigley demonstrates how the less economically wealthy Deaf have formed identities, communities, and economies of their own.

In adding to the well-known traditional and mainstream approaches of producing the Deaf identity (mainly by separation, isolation, and objectification), Wrigley adds the concepts of dissipation and differentiation. In this argument, the politics of cultural diversity, assimilation, and even accommodation under the ADA are all manipulations to reduce the impact of the difference in the individual—a gesture of tolerance rather than acceptance and acknowledgment. Wrigley quotes Martha Minow in saying, “Neither separation nor integration can eradicate the meaning of difference as long as the majority locates difference in a minority group that does not fit the world designed for the majority” (p. 250). His analysis adds to this thought with “No final, overarching resolutions are available. The contingencies of each choice are as likely to encode the possibility of misfortune as to contribute to success. . . . Deafness is best understood as an exemplar of such differences and of the techniques of their suppression [and more]. . . . Social accommodations to those perceived as different may be generally understood as toleration. But tolerance is a tactic of denial, not of affirmation” (pp. 258-261).

One of the most challenging, yet intriguing, chapters is intended to be a departure from the main theses, but supportive of the conclusions. It serves well as a departure, but it is a one-way trip. The author very barely succeeds in showing the relevance of the metaphors and analogies, while failing to explore what difference it makes if we do see the similarities. In his introduction, Wrigley sums up the purpose and content far better than I. “Venturing from deafness and the surveillance of deaf bodies into the cyberpunk work of disembodied dataspheric terrains of consensual networks may seem wildly digressive; yet this perspective radically demonstrates dramatic changes in the epistemology of the social bond as well as making visible the ironic exploitations of the Deaf that have taken place under the auspices of modernity” (pp. 8-9). Hold on to your cyberhats and surfboards, for this wave could drown you. Unfairly taken out of context, but illustrative of his attempt at comparison, is Wrigley’s description of cranial jacks. “The SF [science fiction] literary metaphors that invoke an existence and identity within a disaggregated yet consensual cyberspace are taken from popular dystopias built around ‘console cowboys’ who use a ‘cyberspace deck’ as their mode or vehicle of access. . . . The neural implant socket behind the ear of the cyberpunk cowboy by which he or she jacks in to a hyperreality of unmediated perception has the ring of fanciful fantasy. But the cranial jack behind the ear is not a fiction. . . . The cochlear implant is the prototype for a neurological ‘plug’n’play’ socket” (pp. 203-207). Strangely enough, Wrigley does not discuss how text-based communication (old TTY, new relay services, or virtual mail) have changed the Deaf community and made access a different issue.

I would not recommend this book for undergraduate course assignments, nor for light bus or plane reading, but it could serve its purpose for graduate students as an antidote for insomnia or as a reference text for the literal or figurative academic book shelf. As a defensive afterthought, I do not want readers to assume my criticism about linguistic access is a symptom of a patronizing attitude towards Deaf readers or scholars—it is not. I feel strongly, however, that important work that is “about” us should be accessible to “us,” and my concern is not for the lack of English literacy among Deaf readers, but for the lack of clarity on the part of this particular author. Although an entirely different perspective could be taken on “literacy/illiteracy” as a construction of Deaf education, that is not my current point. Get the book from the library, read it, re-read it, and (I

hope) you will get the picture.

## Film Clips

Meisel, Margo (Producer/Director). *Voices in a Deaf Theater* [video and study guide]. Boston, MA: Fanlight Productions (47 Halifax Street, Boston, MA 02130; 1-800/937-4113), 1996, 24 minutes, \$195.00 purchase, \$50.00 rental/day.

Reviewed by Bonnie Meath-Lang, Artistic Director, Performing Arts, National Technical Institute for the Deaf, Rochester, NY.

This enjoyable and informative film documents the rehearsal process of a cast of Deaf and hearing actors in a college production of Tennessee Williams' *The Glass Menagerie*. While the focus, as the title suggests, is on the learning experienced and the adaptations made by the hearing members of the ensemble voicing the play, there are also engaging glimpses of Deaf culture relayed through the Deaf actors and their personable director, Rita Corey of Gallaudet University.

Academic theater programs such as that at Gallaudet and the National Technical Institute for the Deaf employ a variety of ways of making "theater of the Deaf" accessible to hearing audiences—off-stage voice acting (as illustrated in the film), on-stage voicing by hearing actors playing minor characters—or even props, as in the National Theatre of the Deaf's production using hearing actors on stage encased as portraits, and captions or surtitles. These options are rather quickly noted in the film, and viewers need to remember that the filmmakers' objective is not to be prescriptive and give a "how-to," but rather to explore a creative and rich area of cultural collaboration. In the course of the documentary, Professor Corey, in particular, guides the discussion toward particular and elemental understandings of the Deaf experience in theater: how plays such as *The Glass Menagerie* resonate for Deaf playgoers as a "coming-of-age" story—this in a society where so much acculturation has taken place in schools; how each of the four characters in the play is represented symbolically by the register or variety of American Sign Language used; how the Deaf and hearing actors must work together toward a shared interpretation of their character. And her students have learned well. They address their process in interviews, describing the trust that is essential between the deaf actor and his or her hearing counterpart, and connecting the collaborative experience of theater work to their future goals.

The enclosed study guide provides insight and activities centered on play adaptation and, therefore, is suited to other populations engaged in cross-cultural work. The video is an accessible and thoughtful introduction for high school and college audiences not only to an alternative form of theater, but to issues in teamwork and collaboration across cultures.

Meisel, Margo (Producer/Director). *Voices in a Deaf Theater* [video and study guide]. Boston, MA: Fanlight Productions (47 Halifax Street, Boston, MA 02130; 1-800/937-4113), 1996, 24 minutes, \$195.00 purchase, \$50.00 rental/day.

Reviewed by William Pope.L, Lecturer in Theater, Department of Theater and Rhetoric, Bates College, Lewiston, ME.

*Voices in a Deaf Theater* presents a wonderful example of collaborative process in the theater through a clear, careful, and intelligent description of a bicultural stage production of Tennessee Williams' *The Glass Menagerie* by the Gallaudet University Theater Arts Department. Two people, one a stage actor who is deaf, and one a voice actor who is hearing, were selected for each role. The

video documents the intense interaction between each pair of actors to develop their character, and the strong teamwork among the stage director, the voice director, and all members of the cast to present the play in a manner that accurately reflects both cultural perspectives.

The video explores the importance of focus and theatrical collaboration and shows team members grappling with these issues. It also reveals, once again, the importance of body language in mainstream voice-theater. An added bonus is the inclusion of the work of the National Theatre of the Deaf, an excellent choice, since it expands on the collaborative model used at Gallaudet, which, though respectful, is less satisfying in terms of interaction between the hearing members and the deaf members of the ensemble.

Bottom line, I feel the video is substantially cross-cultural. It provides insights into a process that both deaf and hearing groups will find valuable.

Shasky, James (Producer/Director), and MacBird, Bonnie (Producer). *A Sign of the Times* [video]. Boston, MA: Fanlight Productions (47 Halifax Street, Boston, MA 02130; 1-800/937-4113), 1996, 23 minutes, \$145.00 purchase, \$50.00 rental/day.

Reviewed by Patti Durr, Assistant Professor, National Technical Institute for the Deaf, a College of the Rochester Institute of Technology.

*A Sign of Our Times* is a short video targeting schools and programs that integrate diverse students. The video, which features an instructional aide and a Deaf student from Fairfax High School in Los Angeles, CA, is tastefully edited to have the visual film clips complement the voice over; some of the shots are genuinely touching. However, the focal point and purpose of the program is not entirely clear. Is it simply to highlight the work of a very energetic and self-sacrificing aide/interpreter, Vickie Josefsberg, and her student, Diondre Carter? This unclear focus may leave the viewer with a confused understanding of Deaf people and access rights.

While Josefsberg's dedication to her job is clear, her delivery seems overly dramatic at times and a bit rehearsed. Her rhetoric is sometimes rather "Pollyanna-ish." A more candid and pure representation of what life is like for a Deaf student in a hearing high school in L.A. comes from Diondre's halting comments and from interviews with his mother, Delisa.

The viewer may be left wanting to know more about this unique family and how Delisa has come to have such a positive and productive influence on her son. The very tall and personable Diondre exhibits deft skill both on the basketball court and in his academic work. His mother's attitude toward Diondre's deafness not serving as an obstacle is clearly played out. Diondre mentions his desire to not have people feel sorry for him. It is clear he intends to prevent this by not allowing them to have anything about which to pity him. In contrast, Josefsberg is constantly referring to Diondre as being hearing impaired as if this were his primary identity.

The perils are made evident of being a young Black Deaf man in L.A. waiting for the city bus to go home after a long day of school and basketball practice. However, Diondre's mother aptly expresses her anxiety about wanting to protect her son from harm's way although, simultaneously, wanting him to assert his independence and autonomy. In listening to the two women who play major roles in this young man's life, Josefsberg and Delisa Carter, we see contrasting approaches. One approach emphasizes the disability, and the other accepts what life has to bring and works to better it.

It is interesting to note that, out of all of Diondre's achievements, his mother considers his involvement in a Deaf students' production to be one of her proudest moments. In this production the students only used American Sign Language, with voice interpretation for parents who could

not understand ASL. Seeing that Delisa was not only cool with this, but even proud of it, illustrates her acceptance of her son having two cultural identities—Black and Deaf.

Perhaps the video is appropriately named *A Sign of Our Times*, as it reflects the different viewpoints people take towards diversity and being Deaf. If the viewer watches with a critical eye, I would hope that she or he will walk away from this video with an image of Diondre as he wishes to be viewed—a strong, smart, and likable young man. Not as poor Diondre.

Walters, Ellen (Producer). *Teach Me To.....* [videotape]. Laurinburg, NC: Unpaved Roads Productions (203 Sherbrooke Circle, Laurinburg, NC 28352), 1996, 11-1/2 minutes, \$9.95 purchase.

Reviewed by Marissa Shaw, Berkeley, CA.

The movie opens with a new day dawning. The possibilities of what lessons can be learned by Ms. Richardson's new third grade class are endless. On the first day of school, Ms. Richardson introduces herself to her students and mentions why she uses a wheelchair. Throughout the year, Ms. Richardson is described by her students as being pretty. She has brown hair. She has freckles, and her ears are pierced. When students describe their teacher, the last aspect to be brought up is that she uses a wheelchair. One of the most important life lessons her students learn is that, even though their teacher uses a wheelchair, she is capable of many things. Lisa Richardson makes a point by stating, "Many times I think that my disability is my greatest selling point because I have something different to offer [the students] that no other teacher in that school can offer them." Lisa Richardson's open and honest candor helps to dispel misconceptions and fear regarding people with disabilities. The students' comments are refreshingly honest as well. Although the musical score is a bit distracting, *Teach Me To....* is a video recommended for all to see.